WSW6

## FCC 388

### **DTV Quarterly Activity Station Report**

#### Instructions

Station Call Sign(s)

Report reflects information for quarter ending (mm/dd/yy)

This form should be used to provide the Federal Communications Commission (FCC) with information pertaining to <u>all</u> station activity to educate consumers on the transition to digital television (DTV). All stations should log DTV Transition-Related Public Service Announcements (PSAs) and other DTV activities using the appropriate house (identification) numbers. These logs or records should include the date and time that each DTV activity occurred. This form must be filed in Docket Number 07-148 as Document Type: REPORT, and placed in the station's Public Inspection File. This form must be submitted for each quarter in which a station has DTV Transition education obligations.

Have you opted to co	omply with Op	otion One, Two,	or Three (	once elected, tl	his choice	e may not change)	?
Option One (	A and D)	Option Tw	o (B and	D) O	ption Th	ree (C and D)	
Over the past quarte	er, have you fu	illy complied wit	h the requ	irements of th	is option	?	
Simulcasting Are you simulcasting	on your Analo	g channel and you	ur primary	Digital stream?	,		
		Analog cha	The second secon	a second for you	ur primar	f NO, complete a y Digital stream.	form for your
Call Sign	Channel Nu	umbers		Community of License			
DSW6	Analog	Analog 44 V		Valdasta		County	Zip Code
<i>V3W</i> 0						Lowndes	31601
Licensee					-		
Above, check the Channel I	Number(s) to whic	h this form applies.		Nielsen DMA		N Wide Web Home Page いる。 WSW 6.	
Facility ID Number	ID Number Previous Call Sign (if applicable)		icable)	License Renewal Expiration Date (mm/dd/yy)			
28155 WVAG		ā		0 4		3	

#### Section A (For broadcasters electing Option One)

Stations that elect Option One must place a copy of this form on the station's public website, if such exists.

On its analog channel, and its primary digital stream, a station must air one transition PSA, and run one transition crawl, in every quarter of every day. This requirement will increase to two PSAs and crawls per quarter per day on April 1, 2008, and to three of each on October 1, 2008. Stations are required to air PSAs or crawls at various times in any given day part, and at least one PSA and one crawl per day must be run during primetime hours. On-air education must not contain inaccurate or misleading statements and must be provided in the same language as a majority of the programming carried by the station. PSAs must be at least 15 seconds, and closed-captioned. Crawls must run during programming for no fewer than 60 consecutive seconds across the bottom or top of the viewing area (See rules for additional details).

Have you aired a sufficie	nt number of eligible PSAs (28, 56, or 84 per week, depending on the reporting period)
during the correct quarter	s of the day?
Yes	No No
Have you aired a sufficie	nt number of eligible crawls (28, 56, or 84 per week, depending on the reporting period)
during the correct quarter	s of the day?
Yes	□ No

#### Section B (For broadcasters electing Option Two)

On its analog channel, and its primary digital stream, a station must run an average of 16 transition-related PSAs and 16 transition-related crawls, snipes, and/or tickers per week in each quarter, all between the hours of 5 a.m. and 1 a.m. It must also run one 30 minute DTV-related informational program once, and one 100-Day Countdown piece per day for the 100 days prior to the conclusion of the transition. Comment boxes MUST be used to describe these compliant activities (See rules for additional details).

# Total Number of Eligible DTV Transition-Related PSAs and Crawls, Snipes, and/or Tickers (CSTs) Run - Last Ouarter

Zami ter	
How many DTV PSAs and CSTs did your station run between	1 5:00 a.m. and 1:00 a.m. last quarter?
Total 5:00 a.m. to 1:00 a.m. PSAs	2
Total 5:00 a.m. to 1:00 a.m. CSTs	0
For informational purposes only, how many DTV PSAs and C to 9:00 a.m.?	CSTs did your station run in the last quarter from 6:00 a.m.
Total 6:00 a.m. to 9:00 a.m. PSAs	0
Total 6:00 a.m. to 9:00 a.m. CSTs	0
For stations located in the Eastern or Pacific Time Zone, how last quarter from 6:00 p.m. to 11:35 p.m. (must average at leas	
Total 6:00 p.m. to 11:35 p.m. PSAs	1
Total 6:00 p.m. to 11:35 p.m. CSTs	0
For stations located in the Central or Mountain Time Zone, hast quarter from 5:00 p.m. to 10:35 p.m. (must average at leas	
Total 5:00 p.m. to 10:35 p.m. PSAs	
Total 5:00 p.m. to 10:35 p.m. CSTs	
Comments (add additional sheets where necessary): The column Station during 1st quarter include book Transition education efforts. The State related PSAs and CSTs produced I Broadcasters, the CBS network and	the Voluntary and required DTV non aired a mix of transition - by the National Association of

#### 30 Minute Educational Programs - Last Quarter

program must be run between the hours of 8:00 a.m. and 11:35 p.m., prior to February 17, 2009. Total number of 30 Minute Informational Programs Comments (add additional sheets where necessary): 100 -Day Countdown Eligible Pieces - Last Quarter Beginning on November 10, 2008, all stations participating in Option Two will engage in special 100-Day "Countdown to DTV" activities. Stations must execute a minimum of one "Countdown To DTV" on-air activity per day during the 100 days leading up to February 17, 2009. During the last quarter, how many of each eligible 100-Day "Countdown to DTV" pieces did your station run? Graphic Displays Animated Graphics Graphic and Audio Displays Longer Form Reminders Comments (add additional sheets where necessary):

How many 30 minute, DTV-related informational programs did your station run during the quarter? At least one such

#### Section C (For Noncommercial broadcasters only)

On its analog channel, and its primary digital stream, a station must air 60 seconds per day of on-air consumer education, in variable timeslots, including at least 7.5 minutes per month between 6 pm and 12 am. Beginning May 1, 2008, this requirement doubles, and beginning November 1, 2008, it increases again, to 180 seconds per day and 22.5 minutes per month between 6 pm and midnight. It must also run one 30 minute transition education piece once (See rules for additional details).

Have you aired a sufficient amount of consumer education during each day this quarter?  Yes  No	(60, 120, or 180 seconds per day, depending on the date)				
30 Minute Educational Programs - Last Quarter					
How many 30 minute, DTV-related informational programs may be used to describe this activity. At least one such programs, prior to February 17, 2009.  Total number of 30 Minute Informational Programs					
Comments (add additional sheets where necessary):					

# Section D (For all broadcasters)

reports, town hall meetings, etc.) during the quarter?	The comment box may be used to describe these initiatives.
Yes No	Comments (add additional sheets where necessary): News Report - General DTV Transition News Report - Converter Box Program News Report - General DTV Transition
Station Website Additional Activity Related to the	DTV Transition - Last Quarter
Does your station have a Website?	Yes No
If YES, did your station provide additional DTV relations be used to describe what was posted on the station's W	ted information or activities on that Website? The comment box ma /ebsite.
Yes No	Comments (add additional sheets where necessary):
Additional DTV Outreach Efforts Last Quarte station engaged in over the last quarter. The comment	er Check all of the DTV related activities listed below that your box may be used to describe this activity.
Speaking Engagements	Comments (add additional sheets where necessary):
Community Events	Comments (add additional sheets where necessary):
Other (describe)	Comments (add additional sheets where necessary):
This comment box may be used to include other co	mments or information about your station's DTV activity over
Comments (add additional sheets where necessary):	

Additional DTV On-air Initiatives - Last Quarter Did your station run additional on-air initiatives (such as news

#### STATION CERTIFICATION

I certify that the statements in this document are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Typed or Printed Name of Person Signing	Typed or Printed Title of Person Signing
Michael S. Watson	Master Control Hub Manager
Michael Sals	Date 4/09/08

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/CR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

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